

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

|  |   |  |  |   |   |
|--|---|--|--|---|---|
| <b>NAME OF FILER</b><br>Laura Friedman for Assembly 2022 |   |  | <b>Date of This Filing</b> <u>11/09/2022</u> | Date Stamp<br><br><br><br><br><br><br>Page 1 of 3 | <b>CALIFORNIA FORM 497</b><br>For Official Use Only   |
| <b>AREA CODE/PHONE NUMBER</b><br>(323)655-4065           | <b>I.D. NUMBER</b> (if applicable)<br>1435032 | <b>Report No.</b> <u>LATE-20221108</u> |  |   |   |
| <b>STREET ADDRESS</b>                                    |   |  |  |   |   |
| <b>CITY</b><br>Encino                                    |   |  | <b>STATE</b><br>CA                           | <b>ZIP CODE</b><br>91436                          | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br><small>(explain below)</small> |
|  |   |  | <b>No. of Pages</b> <u>3</u>                 |   |   |

## Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL<br>ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED |
|---------------|--|---|---|-----------------|
| 11/08/2022    | Central City Association PAC<br>San Francisco, CA 94108<br><br>ID# 890198                        | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | \$1,500.00      |
| 11/08/2022    | Glen Dake<br>Los Angeles, CA 90026   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Architect<br>GDML   | \$4,900.00      |
| 11/08/2022    | Sheet Metal Workers Int'l Association Local Union 105<br>Glendora, CA 91740<br><br>ID# 962809    | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | \$4,900.00      |

### \*Contributor Codes

|   |                                   |
|---|-----------------------------------|
| IND - Individual                                  | PTY - Political Party             |
| COM - Recipient Committee (other than PTY or SCC) | SCC - Small Contributor Committee |
| OTH - Other                                       |                                   |

Reason for Amendment:

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| <b>NAME OF FILER</b><br>Laura Friedman for Assembly 2022 |   |                          | <b>Date of This Filing</b> 11/09/2022  | Date Stamp<br><br><br>Page 2 of 3 | <b>CALIFORNIA FORM 497</b><br>For Official Use Only |
| <b>AREA CODE/PHONE NUMBER</b><br>(323)655-4065           | <b>I.D. NUMBER</b> (if applicable)<br>1435032 |                          | <b>Report No.</b> LATE-20221108  |                                   |   |
| <b>STREET ADDRESS</b>                                    |   |                          | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |                                   |   |
| <b>CITY</b><br>Encino                                    | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>91436 | <b>No. of Pages</b> 3  |                                   |   |

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|---------------|--|---|---|-----------------|
| 11/08/2022    | Dake Wilson  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | \$4,900.00      |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 |

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| <b>STREET ADDRESS</b>                                    |   |                          | <input type="checkbox"/> <b>Amendment to Report No.</b> _____<br>(explain below) |   |   |
| <b>CITY</b><br>Encino                                    | <b>STATE</b><br>CA                            | <b>ZIP CODE</b><br>91436 | <b>No. of Pages</b> 3  |   |   |

## Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE<br>OR<br>MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION<br>(IF APPLICABLE) |
|-----------|--|--|------------------------|-------------------------------------|
|           |  |  |                        |                                     |
|           |  |  |                        |                                     |
|           |  |  |                        |                                     |
|           |  |  |                        |                                     |
|           |  |  |                        |                                     |

Reason for Amendment: